



CITY OF GAITHERSBURG ENTERTAINMENT APPLICATION

Date: _____

506 S. Frederick Ave., Gaithersburg, MD 20877
(301) 258-6350 Fax 301-258-6349

PLEASE PRINT OR TYPE ALL INFORMATION

Name of Group _____

Type of Entertainment _____

If Band, what type of music? _____

Please be specific

Group Representative _____

(All information will be sent to this person unless stated otherwise)

Address _____

Street

Apt. No.

City

State

Zip

Day Phone # () _____ Fax # () _____ Evening Phone () _____

Volunteer Group Yes ☐ No ☐

Rate _____ Per _____ Minutes Negotiable Yes ☐ No ☐

No. of sets interested in performing _____ Length of set(s) _____

Does the group or performer carry liability insurance? Yes ☐ No ☐

Make check payable to

Name _____

Address _____

City/State/Zip _____

Fed ID # OR Social Security # required for payment _____

No. of Performers _____ Type of instruments used (list all) _____

No. of Vocalists _____ No. of Microphones (4 maximum) _____ Is a CD/cassette player needed? Yes ☐ No ☐

Do you require electricity Yes ☐ No ☐

Equipment needed (No. of chairs, tables, etc...) _____

Set up time _____ Take down time _____ on or off stage _____

Have you previously performed for the City of Gaithersburg? Yes ☐ No ☐ When? _____

Please list your most recent performance venues _____

Please enclose a demo tape, press release, CD or reference. **All musical groups must submit tapes for review.**

If you have sent a tape in the past, please check with us before sending another, we may have it on file.

ALL APPLICATIONS ARE REVIEWED REGULARLY AND KEPT ON FILE.

revised 01/02